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UEU Zenner 2600 Expedited Procedure - Group 2623

13,02 (202)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	Examiner: M. Dastouri
KITAHIRO KANEDA	) :	Group Art Unit: 2623
Application No.: 09/212,434	) :	
Filed: December 16, 1998	)	
For: COMMUNICATION SYSTEM AND CONTROL METHOD THEREOF, AND COMPUTER-READABLE MEMORY	) : ; ; ; ;	November 6, 2001

Commissioner for Patents Box AF Washington, D.C. 20231

Sir:

## AMENDMENT AFTER FINAL REJECTION

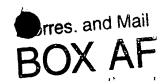
In response to the Office Action dated September 6, 2001, the period for response having been extended to November 6, 2001 by the accompanying Petition For Extension Of Time with fee, please amend the above-identified application as follows:

> I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on

> > (Date of Deposit) <u>Mark</u> J. Itri

ne of Attorney for Applican







Response Under 37 CFR §1.116 Expedited Procedure - Group 2623

In re Application of:

KITAHIRO KANEDA

Application No.: 09/212,434

Filed: December 16, 1998

For: COMMUNICATION SYSTEM AND CONTROL

METHOD THEREOF, AND COMPUTER-

READABLE MEMORY

COMMISSIONER FOR PATENTS

Box AF

Washington, D.C. 20231

Sir:

Docket No.

862.2569

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Examiner: M. DastoupEC 2 8 2001

Group Art Unit: 2022 nology Center 2600

Date: November 6, 2001

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Mark J. Itri

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

		CL	AIMS AS AMENI	DED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 73	MINUS	** 78	.0	x \$9 \$18	0
INDEP. CLAIMS	* 15	MINUS	***	= 0	x \$42 \$84	0
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				0		

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	°Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
X	A check in the amount of \$\( \frac{400.00}{\) to cover the fee for a \( \text{two} \) month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant
•	Registration No. 36, 77,

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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